

Virginia Opioid Abatement Authority

Grants Committee

AGENDA

January 6, 2023

3:30 pm

All Virtual Meeting

<https://zoom.us/j/93544006275>

- | | |
|--|--|
| I) Call to Order, Establish Quorum, and recognition of guests | Dr. Sarah Melton Chair |
| II) Approval of November 16, 2022 Minutes | Dr. Sarah Melton Chair |
| III) Grants Application Overview Individual Cities & Counties Multiple Cities & Counties | Cecil "Charlie" Lintecum Director of Operations |
| IV) Policy and Procedure for Delegated Decision Making for Grant Awards | Cecil "Charlie" Lintecum Director of Operations |
| V) Discussion | Dr. Sarah Melton Chair |
| VI) Adjourn | Dr. Sarah Melton Chair |

OAA Grants Committee Meeting

JANUARY 6, 2023



Terms

- ❖ Individual Distribution to Cities and Counties
 - ❖ Refers to the distributions from the OAA to cities and counties (15% of OAA funds)
- ❖ Direct Distribution to Cities and Counties
 - ❖ Refers to the distributions from the settlement administrator directly to cities and counties (30% of total settlement)
- ❖ Cooperative Partnership Projects
 - ❖ Refers to projects requesting OAA funding involving at least two or more cities and/or counties in the same Department of Behavioral Health and Developmental Services Region.

Individual Cities & Counties Distributions

- Initial Application Period Jan 19 – May 5, 2023
 - Subsequent years October 1 – April 1
- Rolling Two Years Performance Period
 - Current fiscal year (FY23) and next fiscal year (FY24)
 - Subsequent years will amend the current and request the next fiscal year's funding
 - Automatic carryover from FY23 to FY24 and FY24 to FY25 for startup
 - Subsequent carryover requires OAA approval or return of funds
- Separate Accounting
- Direct Distribution Activities
 - Must report to OAA on activities
 - May create a reserve with direct distribution for future abatement activities
- Use of Individual Distribution for Cooperative Partnership Projects
 - Identified in cooperative partnership agreement
- Separate Application for OAA's "Gold Standard" Incentive
- Governing Body resolution required for the Individual Distribution and for the Incentive applications
- Applicants Must
 - Select from predefined performance measures
 - Provide line-item budget and project timeline
 - Agree to all terms and conditions
- Yearly reporting

Cooperative Partnership Projects Involving Multiple Cities & Counties Distributions

- Initial Application Period Jan 19 – May 5, 2023
 - Subsequent years October 1 – April 1
- One-year performance period
 - Initial award will be for FY24
 - Option for up to four, one-year renewals
 - Subsequent awards will require a new full application
 - Automatic carryover from FY24 to FY25 for startup
 - Subsequent carryover requires OAA approval or return of funds
- Must Select a fiscal agent
 - Must be a city or county
 - Separate Accounting
 - Responsible for all financial and reporting requirements
- Must provide cooperative partnership agreement for project
- Use of Individual Distribution for Cooperative Partnership Projects
 - Identified in cooperative partnership agreement
 - Any Direct Distribution or Individual Distribution funds applied to the project must be identified in the budget
- Applicants Must
 - Select from predefined performance measures
 - Provide line-item budget and project timeline
 - Agree to all terms and conditions
- Yearly reporting

Process for Making Grant Awards to Individual Cities and Counties

- All projects reviewed individually
- Staff reviews for compliance
 - Terms & conditions
 - Statutory requirements
 - Presumption of compliance
 - Approach approved by
 - The American Society of Addiction Medicine (ASAM)
 - The Virginia Chapter of ASAM
 - Any agency of the Commonwealth of Virginia
 - Approved by Virginia CSB
 - Expands or enhances an existing program that is measurable and has a successful track records
 - Projects not meeting presumption will be reviewed for approval with statutory requirements
- All projects recommend for approval by staff forwarded to Grants Committee for consideration
- If not compliant, staff with notify applicant and applicant has the following options
 - Consult with OAA staff to either replace or revise the proposed project to achieve compliance and gain staff approval;
 - Withdraw the proposed project;
 - Submit a notice to appeal the recommended for denial.
- Committee votes to approve or not approve at public meeting
 - Voting may be in blocks or individually
 - Any projects that present a potential conflict of interest to a committee member will be presented individually
 - Appealing applicants can present appeal to committee
 - If not approved by committee, applicant may appeal to full Board

OAA Grants – Main Page

WELCOME TO THE VIRGINIA OPIOID ABATEMENT AUTHORITY'S GRANTS PORTAL.
FROM THIS PAGE YOU CAN FIND LINKS TO ALL THE RESOURCES YOU NEED TO
SUBMIT AN APPLICATION FOR FUNDING TO THE OAA. FOR ANY QUESTIONS PLEASE
CONTACT GRANTS@VOAA.US OR CALL (804) 500-18XX.

Overview, Glossary of Terms, & References

Grants for
Individual
Cities
And
Counties

Grants for
Cooperative
Partnerships of
Multiple Cities or
Counties

Grants
For
State
Agencies

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Homepage

Overview, Glossary of Terms, & References

[Overview](#)

[Glossary of Terms](#)

[Estimated Opioid Settlement Fund Distributions by County and City](#)

[OAG's Key Provisions on Opioid Settlements](#)

[APA Financial Reporting Guidance to Cities and Counties](#)

[Distributors & Janssen List of Opioid Remediation Uses \(Exhibit E\)](#)

[VA Settlement Allocation Memorandum of Understanding](#)

[Code of Virginia – Opioid Abatement Authority & Abatement Fund](#)

[OAA Policies:](#)

- [Incentive for Cities and Counties to follow the OAA Gold Standard](#)
- [Policy on Process for Making Awards to Individual Cities and Counties](#)
- [Policy on Process for Making Awards to Cooperating Partnerships](#)
- [Policy on Process for Making Awards to State Agencies](#)

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Grants for Individual Cities And Counties

[Guidance Document](#)

[Application / Project Proposals](#)

[Application for the OAA Gold Standard Incentive](#)

[Terms and Conditions](#)

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Grants for Cooperative Partnerships of Multiple Cities or Counties

[Guidance Document](#)

[Application / Project Proposals](#)

[Terms and Conditions](#)

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Grants For State Agencies

Under Construction

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Questions?



Application for Individual Awards to Cities and Counties

1. Contact Information

- a. Name of City or County: _____
city / county (circle one)
- b. Physical address: _____
- c. Mailing address: _____
(if different than physical address)
- d. Contact Person for this application
- i. Name: _____
- ii. Job Title: _____
- iii. Office Phone: _____ Cell Phone: _____
- iv. Email: _____

2. Distribution Information

- a. Provide the following regarding how the city or county has used (or is planning to use) its direct distributions (from the settlement administrator):

i. For the **Distributors Settlement**:

| | |
|---|--|
| Amount of direct distributions received during FY2023 (<u>Amounts can be found here</u>) | |
| Amount appropriated by the governing body in FY2023 | |
| FY2023 actual expenditures | |
| FY2023 encumbered but not yet expended | |
| FY2023 remaining unspent and unencumbered balance | |
| FY2024 anticipated direct distribution from Distributor Settlement (<u>Amounts can be found here</u>) | |

ii. For the **Janssen Settlement**:

| | |
|---|--|
| Amount of direct distributions received during FY2023 (<u>Amount can be found here</u>) | |
| Amount appropriated by the governing body in FY2023 | |
| FY2023 actual expenditures | |
| FY2023 encumbered but not yet expended | |
| FY2023 remaining unspent and unencumbered balance | |

- iii. Provide a narrative reflecting the uses (actual or planned) of the direct distributions for the city or county from the Distributors and Janssen for both FY2023 and FY2024. Include a description of project(s) funded with these direct distributions, the target audience or population, names and responsibilities of subrecipients or contractors, and any outcomes that have been achieved. If no funds have been used, state the city or county's plans for these funds. (Attach additional sheets if needed).

- b. Does the city or county intend to reserve any portion of its direct distributions from FY2023 or FY2024 for future year abatement efforts?

- ☐ Yes
- ☐ No

If yes, see Terms and Conditions item #2.e.

- c. Does the city or county intend to apply for the OAA's city or county "Gold Standard" incentive program in FY2023 and FY2024?

- Yes
- No

If yes, complete the form entitled "Application and Terms and Conditions to Receive OAA Incentive Funds"

- d. For each proposed project in FY2023 and FY2024, complete and attach Part 4 "Project Proposal" of this application. The total amount of funding requested should not exceed the amount for the city or county as published in this document.
- e. Attach a copy of a resolution from the governing body of the city or county providing signatory authority. If the city or county is requesting the Gold Standard incentive, ensure this is noted in the resolution from the governing body. A sample resolution can be found in this application packet.

3. Signature

Signature section must be completed by the person designated with signatory authority in the resolution noted in Part 2.e of this application.

"I swear or affirm that all information contained in and attached to this application is true to the best of my knowledge."

Signature_____

Print Name_____

Title_____

Date_____

4. Project Proposal

Complete the information below **for each project** the city or county is requesting to be funded.

a. Name of City or County: _____
city / county (circle one)

b. Project name: _____

c. Contact Person for this project

i. Name: _____

ii. Job Title: _____

iii. Office Phone: _____ Cell Phone: _____

iv. Email: _____

d. Is this project:

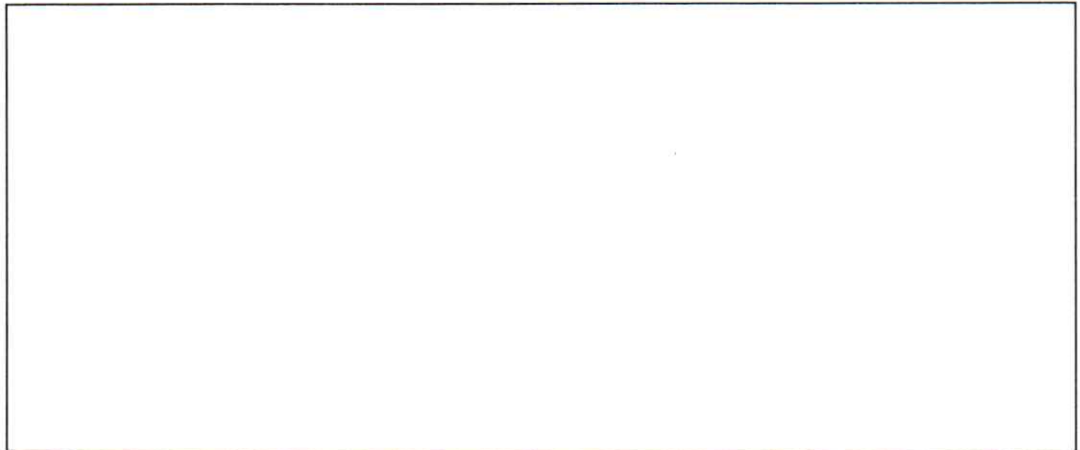
- A new effort for the city / county.
- A proposed supplement or enhancement to a project or effort that is already in place.
 - How long has the project existed? _____
- A combination of enhancing an existing project/effort with new components.
 - How long has the project existed? _____

e. Provide a brief narrative description of the proposed project.

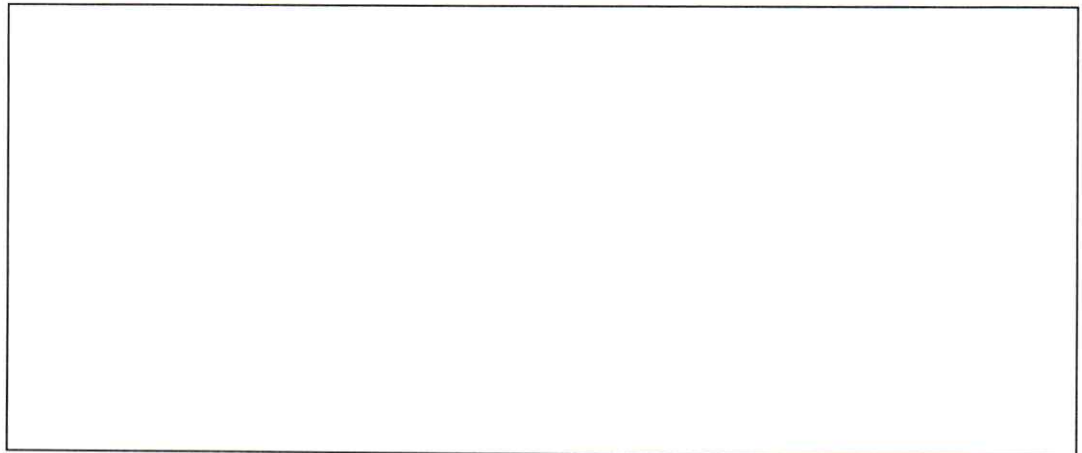
f. Describe the objectives of this project

g. How was the need determined and how does that need relate to abatement?

h. Briefly describe (name or organization, description of role, budget, etc.) the organization(s), including any sub-recipients or contractors (if known) that will be involved in this project. Attach any contracts and/or memoranda of understanding/agreement. If not fully executed, a draft or a narrative describing the scope of services may suffice.



- i. Who are the targeted beneficiaries, and how many persons are expected to participate per year?



- j. Is the project classified as evidence-based?

- ☐ Yes
- ☐ No

If yes, attach supporting information to this application.

- k. Is the project classified as evidence-informed?

- ☐ Yes
- ☐ No

If yes, attach supporting information to this application.

- l. Has this project been certified or credentialed by a state/federal government agency, or other organization/non-profit?

- ☐ Yes

- No
If yes, attach supporting information to this application.

m. Has this project received any awards or recognition?

- Yes
- No
If yes, attach supporting information to this application.

n. Does this project have components other than opioid-related treatment as defined?

- No, it is 100% related to opioid treatment
- Yes, there are other substances involved
If yes, what is the approximate percentage of the project that covers opioid-related abatement (i.e., 20% of the patients who seek services have opioid-related disorders)?

- o. Attach a budget for FY2023 and a budget for FY2024 with line-item details for the project. If carry-over of OAA funds from FY2023 into FY2024 is expected, include this in the line item budget.
- p. Complete and attach the project timeline workbook for each project covering both FY2023 and FY2024
- q. Complete and attach the Performance Measurement Workbook for each project covering both FY2023 and FY2024
- r. *(Optional)* Attach any letters of support, articles, or other items that may assist the OAA Board of Directors in making an award decision for this project.

Application and Terms and Conditions for Cities and Counties to Receive OAA "Gold Standard" Incentive Funds

1. Contact Information

a. Name of City or County: _____
city / county (circle one)

b. Physical address: _____

c. Mailing address: _____
(if different than physical address)

d. Contact Person for this application

i. Name: _____

ii. Job Title: _____

iii. Office Phone: _____ Cell Phone: _____

iv. Email: _____

2. Agreements

The governing body of the city or county named in this application is applying to the OAA to receive the incentive that increases the city or county's OAA Distribution by 25% for FY2023 and FY2024. To qualify for the incentive, the city or county agrees to the terms and conditions set forth for the OAA Distributions to Cities and Counties as well as the following requirements:

- a. The city or county will create and maintain separate accounting records for funds received from the OAA Distribution and from Direct Distribution in accordance with relevant guidance published by the Auditor of Public Accounts.
- b. The city or county voluntarily agrees to apply the requirements of Code of Virginia §2.2-237 (A), to its Direct Distributions. These set of requirements are known as the "Gold Standard."
- c. The city or county has adopted and attached a resolution noting that it will voluntarily agree to meet the OAA's "Gold Standard" requirements in return for a 25% increase in OAA funding for FY2023 and FY2024.

3. Signature

Signature section must be completed by the person designated with signatory authority in the resolution noted in Part 2.c of this application.

"I swear or affirm that all information contained in and attached to this application is true to the best of my knowledge."

Signature_____

Print Name_____

Title_____

Date_____

DRAFT

Application for Awards for Cooperative Projects Involving Cities and Counties

1. Contact Information

This application is for cooperative projects consisting of a cooperative partnership between at least two cities and/or counties within the same Department of Behavioral Health and Developmental Services (DBHDS) region.

Complete this table for all cities and/or counties involved in the cooperative partnership.

| Name of City/County | Contact Person | Mailing Address | Phone # | Email |
|---------------------|----------------|-----------------|---------|-------|
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2. Fiscal Agent

- a. One of the participating cities or counties must serve as the fiscal agent for the cooperative project. The fiscal agent will be responsible to ensuring compliance with both financial and programmatic reporting requirements on behalf of the cooperative partnership.
- b. City/County Serving as Fiscal Agent _____

city / county (circle one)

- a. Physical address: _____
- b. Mailing address: _____
(if different than physical address)
- c. Contact Person for fiscal agent and this application
 - i. Name: _____
 - ii. Job Title: _____
 - iii. Office Phone: _____ Cell Phone: _____
 - iv. Email: _____

3. Agreements

- a. Attach a copy of the memorandum of understanding/agreement (MOU/MOA) between the participating cities and/or counties for the project (cooperative partnership agreement). The agreement should also designate the city or county selected as fiscal agent for the cooperative project.
 - i. If any participating city and/or county elects to allocate a portion of its Individual Distribution from the OAA to this regional project, the Cooperative Partnership Agreement should clearly document the commitment and amount.

4. Signature

Signature section must be completed by a person designated with signatory authority in the MOU/MOA noted in Part 3.a of this application.

"I swear or affirm that all information contained in and attached to this application is true to the best of my knowledge."

Signature _____

Print Name _____

Title _____

Date _____

5. Project Proposal

Complete the information below for the project the cooperative partnership is requesting to be funded.

a. Is this project:

- A new effort for the participating cities/counties.
- A proposed supplement or enhancement to a project or effort that is already in place.
 - How long has the project existed? _____
- A combination of enhancing an existing project/effort with new components.
 - How long has the project existed? _____

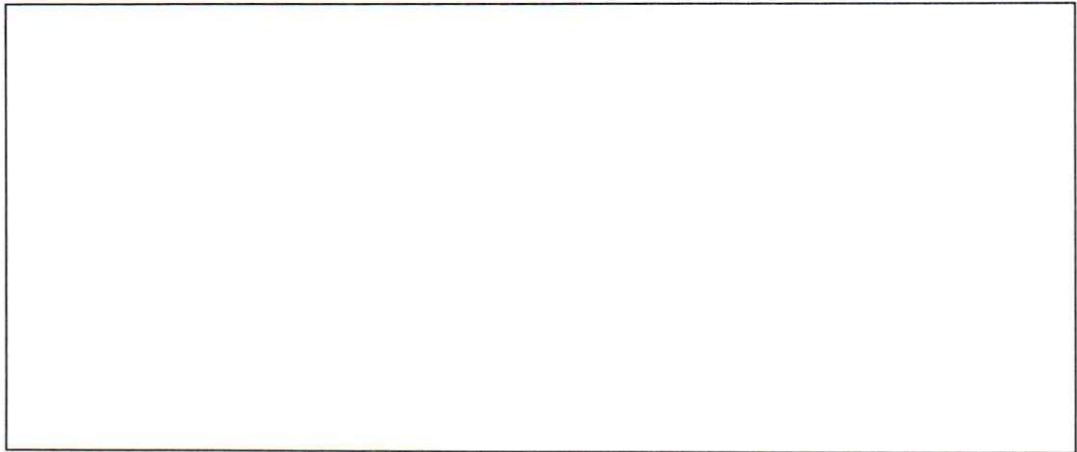
b. Provide a brief narrative description of the proposed project.

c. Describe the objectives of this project

- d. How was the need determined and how does that need relate to abatement?

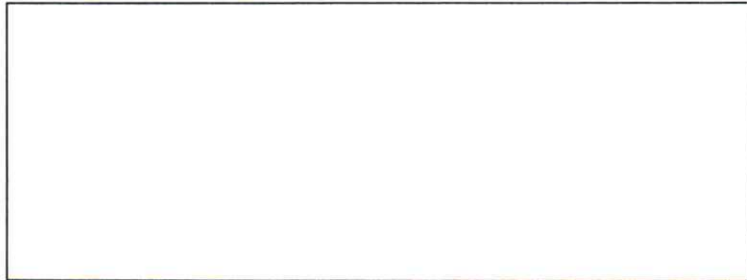
- e. Who are the targeted beneficiaries, and how many persons are expected to participate per year?

- f. Briefly describe (name or organization, description of role, budget, etc.) the organization(s), including any sub-recipients or contractors (if known) that will be involved in this project. Attach any contracts and/or memoranda of understanding/agreement. If not fully executed, a draft or a narrative describing the scope of services may suffice.



- g. Is the project classified as evidence-based?
- ☐ Yes
 - ☐ No
- If yes, attach supporting information to this application.*
- h. Is the project classified as evidence-informed?
- ☐ Yes
 - ☐ No
- If yes, attach supporting information to this application.*
- i. Has this project been certified or credentialed by a state/federal government agency, or other organization/non-profit?
- ☐ Yes
 - ☐ No
- If yes, attach supporting information to this application.*
- j. Has this project received any awards or recognition?
- ☐ Yes
 - ☐ No
- If yes, attach supporting information to this application.*
- k. Does this project have components other than opioid-related treatment as defined?
- ☐ No, it is 100% related to opioid treatment
 - ☐ Yes, there are other substances involved

If yes, what is the approximate percentage of the project that covers opioid-related abatement (i.e., 20% of the patients who seek services have opioid-related disorders)?



- l. Attach a budget for FY2024 with line-item details for the project. If carry-over of OAA funds from FY2024 into FY2025 is expected, include this in the line-item budget.
 - i. If a city or county in the cooperative partnership is allocating any of its Direct Distributions and/or any of its Individual Distributions from the OAA to this cooperative project, include line items for each as funding sources for the project.
- m. Complete and attach the project timeline workbook for the project for FY2024
- n. Complete and attach the Performance Measurement Workbook for the project for FY2024
- o. *(Optional)* Attach any additional narrative materials explaining the project, along with any research, data, plans, letters of support, articles, or other items that may assist the OAA Board of Directors in making an award decision for this project.

OAA Process for Making Grant Awards to Individual Cities and Counties

Grants submitted by cities or counties for individual awards will be reviewed at the project level.

- a. If a city or county submits an application that contains five different projects all within the same application, each of those five projects will be reviewed independently.

OAA staff will evaluate each project to determine if it complies with the terms and conditions of the OAA, and with the statutory obligations contained in the *Code of Virginia* § 2.2-2370 (A).

1. A project will be *presumed* compliant with the statute if it meets one or more of the following three criteria:
 - a. The project utilizes an approach toward abatement that is formally approved, certified, accredited, or otherwise credentialed by:
 - i. The American Society of Addiction Medicine (ASAM)
 - ii. The Virginia Chapter of ASAM
 - iii. Any agency of the Commonwealth of Virginia
 - b. The project utilizes an approach that has been previously implemented successfully by a Community Services Board in the Commonwealth of Virginia.
 - c. The project seeks to expand or enhance an existing program that the applicant is currently operating with a measurable and successful track record.
2. Projects that do not meet any of these specific “presumption” criteria may still be recommended for approval if staff finds the project meets the statutory obligations of § 2.2-2370 (A).
3. All projects that are recommended for approval by the staff will be forwarded to the Grants Committee for consideration.

If staff determines a project does not meet the OAA’s terms and conditions or the statutory obligations of § 2.2-2370 (A), staff will notify the applicant in writing that the project is being recommended for denial. The notification will offer the applicant the following options:

1. Consult with OAA staff to either replace or revise the proposed project to achieve compliance and gain staff approval;
2. Withdraw the proposed project;
3. Submit a notice to appeal the recommended for denial.

If the applicant does not choose one of these options within 30 days of notification, the project will be recommended to the Grants Committee for denial.

If the applicant submits a notice to appeal, staff will forward the appeal notice along with the recommendation for denial to the Grants Committee.

The Grants Committee will convene a publicly noticed meeting to review the recommendations made by staff. Applicants that submitted a notice to appeal will be invited to address the Committee and to present their appeal during the public meeting. Appeals and other public comments may be limited in time duration at the discretion of the Committee chair.

After hearing any appeals and other public comments, and after any further Committee discussions have concluded, the Committee will vote on the projects. The Committee will vote to designate projects as either “approved” or “not approved.” Votes may be taken on an individual project basis or the projects may be voted on in blocks, at the discretion of the Committee Chair.

Applicants whose projects were designated as “not approved” by the Grants Committee will be invited to file a written notice to appeal the denial to the full OAA Board of Directors. The Board of Directors will provide an opportunity for applicants to present their appeal at publicly noticed meetings of the Board. After hearing any appeal the Board will take a final vote on the appeal. The Board’s decision shall be final.

Conflict of Interest

In support of the Board’s Conflict of Interest policy, OAA staff will:

1. Provide applications up for approval or denial to Committee and Board members ahead of any meetings.
2. Separate and notate any applications that potentially present a conflict of interest for a Committee or Board member.
 - a. Any applications in this category will be presented and voted on individually to allow the member to recuse themselves without impacting their vote on other applications